	S FILED - I		Colum	nn 2)		SMALL EN	ιτιτγ <sup>*</sup> ⊐	OR	OTHER SMALL	
OTAL CLAIMS 19						RATE	FEE		RATE	FEE
OR	NUMBER F	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
OTAL CHARGEABLE CLAIMS	14 min	us 20=	•			X\$ 9=		OR	X\$18=	
DEPENDENT CLAIMS	5 mir	5 minus 3 =		•		X40=		OR	X80=	
ULTIPLE DEPENDENT CLAIM PRESENT					+135=			+270=		
If the difference in column 1 is less than zero, enter			r "0" in c	olumn 2				OR		77
CLAIMS AS	•					TOTAL		OR	OTHER	THAN
(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	
CLAIMS REMAINING AFTER AMENDMEN		HIGH NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total • Independent •	Minus	** (	2/)	美國学		X\$ 9=		OR	Ƴ X\$18=	142
Independent •	Minus	••• 4	· ·	Zer.		X40=			X80=	
FIRST PRESENTATION OF	MULTIPLE DEP	ENDEN	T CLAIM			740-		OR 		
						+135=	·(1	OR	+270=	TunVis.
	•		May ye		•	TOTAL ADDIT, FEE	,	OR	TOTAL ADDIT. FEE	
(Column 1	).		mn 2)	(Column 3)	. ;			- - 4		
CLAIMS RÉMAINING AFTER VAMENDMEN	•	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI: TIONAL: FEE		RATE	ADDI- TIONAI FEE
Total & A.	Minus	**		=		X\$ 9=	•	OR	X\$18=	
( I vial territoria					1				X80=	3.33
) Profession and the profession of the professio	Minus	***	•	=		X40=				
Independents • FIRST PRESENTATION OF			T CLAIM	=		X40=		OR	1	4 7 E
Independents • FIRST PRESENTATION OF			CLAIM			+135=		OR OR	+270=	
Independents • FIRST PRESENTATION OF			T CLAIM	=				•	1	
Independent : FIRST PRESENTATION OF	MULTIPLE DEP	PENDEN	mn 2)	(Column 3)		+135=		OR	+270= TOTAL	
FIRST PRESENTATION OF  (Column 1  CLAIMS  REMAINING	MULTIPLE DEP	(Colu				+135=	ADDI- TIONAL	OR	+270= TOTAL	ADDI-
FIRST PRESENTATION OF  (Column 1  CLAIMS  REMAINING	MULTIPLE DEP	(Colu	mn 2) HEST MBER OUSLY	(Column 3)		+135= TOTAL ADDIT, FEE	ADDI-	OR OR	+270= TOTAL ADDIT. FEE	ADDI-
FIRST PRESENTATION OF  (Column 1 CLAIMS REMAINING AFTER AMENDMEN	MULTIPLE DEP	(Colu Higi NUM PREVI PAID	mn 2) HEST MBER OUSLY	(Column 3) PRESENT EXTRA		+135= TOTAL ADDIT. FEE  RATE  X\$ 9=	ADDI- TIONAL	OR OR	+270= TOYAL ADDIT. FEE  RATE  X\$18=	ADDI-
(Column 1 CLAIMS REMAINING AFTER AMENDMEN	MULTIPLE DEP	(Colu Higi NUM PREVI PAID	mn 2) HEST MBER OUSLY FOR	(Column 3) PRESENT EXTRA		+135= TOTAL ADDIT. FEE	ADDI- TIONAL	OR OR	+270= TOYAL ADDIT. FEE	ADDI- TIONA FEE